

BCSAUC-004 (10/07)

Side 1

Michigan Department of Labor & Economic Growth
Bureau of Commercial Services - Licensing Division
AUCTIONEER REGISTRATION
P.O. Box 30018, Lansing, MI 48909
517-241-9288; Fax 517-373-1044
www.michigan.gov/auctioneers
Exam information: www.psiexams.com

This document can be completed on-line.
Place the cursor in the first field, make your entry, and tab to the next field. When you are finished, press the print button to print your completed form. This form CANNOT BE submitted electronically. If you need to clear the form for any reason, click the Clear button.

FOR OFFICE USE ONLY

ISSUE DATE

APPROVED BY

AUCTIONEER FIRM REGISTRATION APPLICATION

AUTHORITY: P.A. 299 of 1980, as amended

COMPLETION: Mandatory

PENALTY: Failure to complete may result in denial of your application

APPLICANT INSTRUCTIONS AND INFORMATION:

- Please print in black ink or type your responses.
- Examinations are issued by PSI, Inc. When application is approved, the Department will notify you to register for the exam at: www.psiexams.com.
- If a **corporation**, attach a date-stamped, filed copy of the Articles of Incorporation and a copy of any filed corporate Assumed Name Certificate, if applicable. If **LLC**, attach a copy of the filed Articles of Organization and copy of any LLC Assumed Name Certificate, if applicable. **Partnership** applicants attach a county clerk's certificate of co-partnership and any partnership Assumed Name Certificate, if applicable.
- All registrations must be renewed by September 30th of odd-numbered years.

SECTION 1 - GENERAL APPLICATION INFORMATION - Type or print response in black ink.

Applicant Business Name (Corporation, LLC or Partnership)	Federal I.D. No.
D/B/A name, if applicable (See instruction #3 above)	Auctioneer I.D. Number (If previously registered) 28-02
Street Address (No. P.O. Box, unless part of the street address)	Daytime Telephone Number
City, State, Zip Code	E-mail Address

SECTION 2 - MEMBER INFORMATION - Complete the following for all applicable Members, Managers, Officers, Directors and Shareholders (Attach additional sheets as needed). First name entered below must be Qualifying Member.

Name (Last, First, Middle)	Daytime Telephone Number
Street Address (No. P.O. Box, unless part of the street address)	% Corporate Stock or Office Held (if applicable)
City, State, Zip Code	Social Security Number
Name (Last, First, Middle)	Daytime Telephone Number
Street Address (No. P.O. Box, unless part of the street address)	% Corporate Stock or Office Held (if applicable)
City, State, Zip Code	Social Security Number

FEE PAYMENT INFORMATION (Check Appropriate Box)

FOR OFFICE USE ONLY - VALIDATION

- | | | |
|---|-----------|---------|
| <input type="checkbox"/> Application Processing and 1st Year Registration Fee | \$ 250.00 | 2801-01 |
| <input type="checkbox"/> *Re-registration fee | \$ 270.00 | 2801-06 |
| <input type="checkbox"/> Reinstatement (after revocation) | \$ 50.00 | 2801-50 |
| <input type="checkbox"/> Reissue lapsed registration in same 2-year cycle | \$ 10.00 | 2801-32 |
| * application processing fee, registration fee and late fee | | |

Make your check or money order from a U.S. Financial Institution payable to:

STATE OF MICHIGAN - AUCTIONEERS

Fees are not refunded except under Authority P.A. 152 of 1979, as amended and R338.943 and R338.944.

The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

SECTION 3 - BACKGROUND INFORMATION (Please check appropriate box and attach requested documents.)		
Have you, or any applicable Members, Managers, Partners, Officers, Directors and Shareholders named in the applicant's entity:	YES	NO
<p>A) Have you ever been convicted of a felony or misdemeanor for which you could have gone to jail?</p> <p style="margin-left: 20px;">If yes, please download the "Request for Conviction History" form under Applicant Information at the web address: http://www.cis.state.mi.us/bcsc/forms/lce020.pdf. Complete and attach the form to your application. Your application will not be processed without the completed form.</p>		
<p>B) Have you ever had disciplinary action taken against any license, registration or permit you now hold or have ever held?</p> <p style="margin-left: 20px;">If yes, please download the "Request for Disciplinary Action Information" form under Applicant Information at the web address: http://www.cis.state.mi.us/bcsc/forms/lce021.pdf. Complete and attach the form to your application. Your application will not be processed without the completed form.</p>		
<p>C) Are you currently licensed or registered in any other State(s) as an Auctioneer? If yes please provide a certificate of good standing for each state.</p>		
<p>D) Do you understand that this application must be completed and on file with the State of Michigan thirty days prior to the date of examination for which you are applying? (Exam Applicants only)</p>		
SECTION 4- EXAMINATION OR EXPERIENCE (Please check appropriate boxes and attach requested documents.)		Check box
<p>A) I have not passed the auctioneer registration examination. I will register for the examination.</p>		
<p>B) I have 3 or more years experience as an auctioneer, I am exempt from having to take the exam. Please see attached affidavit attesting to experience (BCS/AUC-003) located at http://www.cis.state.mi.us/bcsc/forms/auct/auc003.pdf.</p>		
<p>C) I have graduated from an accredited auctioneer school and have one year of apprentice experience with a registered auctioneer. Please see attached graduation certificate and Apprentice Activity Log (BCS/AUC-002) located at http://www.cis.state.mi.us/bcsc/forms/auct/auc002.pdf.</p>		
<p>D) I have two years of apprentice experience with a registered auctioneer. Please see attached Apprentice Activity Log (BSC/AUC-002) located at http://www.cis.state.mi.us/bcsc/forms/auct/auc002.pdf.</p>		
<p>E) I hold a current license in another state as an auctioneer, therefore request exemption from the exam. I have attached a copy of my current license(s) and a certificate of good standing.</p>		
SECTION 5- CERTIFICATION AND SIGNATURE		
<p>I hereby certify that the statements in this application are true and correct. I have not withheld information which might affect the decisions to be made on this application. I am aware that a false statement or dishonest answer may be grounds for denial of my application or disciplinary action against my registration, or punishable by law. I hereby authorize the Department of Labor and Economic Growth and its agents to investigate any statements made by me in this application, including checking criminal, civil and administrative records. I authorize the Department and its agents to examine my books and records at the Department's discretion. I understand that I cannot use the title "registered auctioneer" until my application is approved and registration issued.</p> <p>Furthermore, I hereby attest to having thorough knowledge of Article 29 and the provisions described within and do promise to abide by them at all times, along with auctioneer rules as they are promulgated. I acknowledge that failure to do so may result in loss of my ability to act as a Registered Auctioneer for the State of Michigan.</p>		
<div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 10px;"></div> <p>Signature for Entity Applicant</p>	<div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 10px;"></div> <p>Date</p>	
<div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 10px;"></div> <p>Name Printed</p>	<div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 10px;"></div> <p>Office held or description of ownership interest</p>	